

Aetna's Providers and Networks for HMO and CDH Gold Plans

Aetna HMO Plan: Aetna's national network of HMO providers are available across the country, but are not available in every <http://www.aetna.com/statede/y> community. Members may find providers in their specific community by using this website <http://ben.omb.delaware.gov/medical/aetna/index.shtml> and clicking on Locate Participating Providers – Doc Find. Information provided through this site is specific to the State of Delaware's members.

Members are required to designate a Primary Care Physician (PCP) when enrolling in this plan. Each family member may have a different PCP. Members may change their PCP by contacting Aetna's Customer Services at 1-877-542-3862 or by visiting Aetna Navigator at <http://www.aetna.com/statede/>

Members with a family member living away from home, such as a college student, may designate a PCP in the college student's community and when the student returns home change to a PCP in his/her home community OR college student may use an Urgent Care facility if needed when away from home and when he/she returns home receive services from PCP in his/her home community.

Aetna CDH Gold Plan: In-network and out-of-network providers may be used by members of Aetna's CDH Gold Plan. Members may find physicians in their specific community by using this website <http://ben.omb.delaware.gov/medical/aetna/index.shtml> and clicking on Locate Participating Providers – Doc Find. Information provided through this site is specific to the State of Delaware's members.

When a member receives services from an in-network provider, that provider will first send the claim to Aetna for processing. Aetna will process the claim and use HRA funds to make payment, if funds are available. If HRA funds are not available, then the member will be responsible for the costs.

When a member receives services of an out-of-network provider, that provider may require the member to pay at the time of services OR may send the claim to Aetna for processing. If the member pays, at the time of service then he/she may make a written request by submitting proof of payment with a claim form directly to Aetna. Claim form and address where to mail the claim form is available at <http://ben.omb.delaware.gov/medical/aetna/index.shtml> If the provider will send the claim to Aetna first, Aetna will process the claim and use HRA funds to make payment, if funds are available. If HRA funds are not available, member will be responsible for all costs. Out-of-network providers may balance bill the member for the difference in the billed amount and the amount received from Aetna.